

POSITION	ID NO.	DATE
CLASSIFIER	11	1/5/98
EXAMINER		
TYPIST	3,3 3/2/98	70038 2/10/98
VERIFIER		
CORPS CORR.		
SPEC. HAND	67320	
FILE MAINT.		
DRAFTING		

## Best Available Copy (Copy)

### INDEX OF CLAIMS

Claim	Date
Final	Original
1	24 24 16 10 8 11 1 25
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SYMBOLS

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral) ..... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

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